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CONFIRMATION NO. 5380

Bib Data Sheet

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/903,749	07/11/2001 RULE	424	1649	10466/43
<b>APPLICANTS</b> Audrey Goddard, San Francisco, CA; Paul J. Godowski, Burlingame, CA; Austin L. Gurney, Belmont, CA; William I. Wood, Hillsborough, CA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/665,350 09/18/2000 ABN which is a CON of PCT/US00/04414 02/22/2000 which is a CIP of PCT/US99/23089 10/05/1999 which claims benefit of 60/104,080 10/13/1998 and is a CIP of PCT/US98/19330 09/16/1998 which is a CIP of PCT/US98/18824 09/10/1998 which claims benefit of 60/059,263 09/18/1997				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 08/13/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 124
			TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
<b>ADDRESS</b> 35489				
<b>TITLE</b> ANTI-PRO211 POLYPEPTIDE ANTIBODIES				
<b>FILING FEE RECEIVED</b> 1010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	